

|   |                          |                            |
|---|--------------------------|----------------------------|
| <b>DECLARATION FOR UTILITY OR DESIGN<br/>PATENT APPLICATION<br/>(37 CFR 1.63)</b><br><br><input checked="" type="checkbox"/> Declaration Submitted With Initial Filing <b>OR</b> <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) | Attorney D ck t Numb r   | 265/282                    |
|   | First Named Invent r     | Tim E. Ward & Mark Mallaby |
|   | <b>COMPLETE IF KNOWN</b> |                            |
|   | Application Number       | /                          |
|   | Filing Date              |                            |
|   | Group Art Unit           |                            |
|   | Examiner Name            |                            |

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ECHOGENIC SURFACE FOR ENHANCED ULTRASONIC VISIBILITY**

the specification of which (Title of the Invention)

☒ is attached hereto

**OR**

☐ was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) Country | Priority Not Claimed     | Certified Copy Attached? |                          |
|-------------------------------------|---------|--|--------------------------|--------------------------|--------------------------|
|                                     |         |  |                          | YES                      | NO                       |
| NONE                                |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:

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or Bar Code Label  
22249



22249

OR

☒ Correspondence address below

PATENT TRADEMARK OFFICE

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name Tim E.  
(first and middle [if any])

Family Name Ward  
or Surname

Inventor's  
Signature

*Tim E. Ward*

Date December 10, 2001

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☐ A petition has been filed for this unsigned inventor

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☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside the box → ☐

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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# **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

|                               |                              |
|-------------------------------|------------------------------|
| <b>Application Number</b>     | To Be Assigned               |
| <b>Filing Date</b>            | To Be Assigned               |
| <b>First Named Inventor</b>   | Tim E. Ward and Mark Mallaby |
| <b>Group Art Unit</b>         | To be Assigned               |
| <b>Examiner Name</b>          | To be Assigned               |
| <b>Attorney Docket Number</b> | 265/282                      |

I hereby appoint:

☒ Practitioners at Customer Number

22249



22249

☒ Please direct correspondence to practitioner(s) named below:

| Name          | Registration Number |
|---------------|---------------------|
| David E. Wang | 38,358              |
|               |                     |
|               |                     |
|               |                     |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

## **SIGNATURE of Applicant or Assignee of Record**

Name SCIMED LIFE SYSTEMS, INC.

Signature By:

Name: Albert K. Kau

Title: Patent Counsel

Date December 10, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of one form is submitted.

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